N43/83

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
<u></u>
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
•
Special Instructions to Filing Officer:

Office Use Only



100331912961

97/22/19--01008--016 ******85.00

19 AUG -7 AM 9: 49
SEGRETARY OF STATE
FALL AHASSEF, FLORIDA

AUB 08 7173 T SCHROEDER

COVER LETTER

Division of Corporations	
NAME OF CORPORATION: <u>AMVETS POST NO. 8, FNC</u>	
DOCUMENT NUMBER: N43183	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
JOHN W. SOULE (Name of Contact Person)	
(Name of Contact Person)	
AMVETS POST NO. 8, INC.	
(Firm/ Company)	
4681 COUNTY ROAD 16 (Address)	
(Address)	
57. PETERSBURG FL 33709 (City/ State and Zip Code)	
(City/ State and Zip Code)	
anvetspost 8 @ MSN. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TOHH W. SOULE at 727 544-6810 (Name of Contact Person) (Area Code) (Daytime Telephone Number	
(Name of Contact Person) (Area Code) (Daytime Telephone Number	r)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee & Certificate of Status (Additional copy is Enclosed)	
Mailing Address Street Address	
Amendment Section Amendment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

AMVETS POST NO. 8	Urrently filed with the Florida Dept. of State)	
	urrently filed with the Florida Dept. of State)	
N 43/83		
(Document N	Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida S amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following	lowing
A. If amending name, enter the new name of the corp	poration:	
		e new
name must be distinguishable and contain the word "con "Company" or "Co." may not be used in the name.	prporation" or "incorporated" or the abbreviation "Corp." or	'Inc.''
·		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	<u>-</u>
	<u> </u>	
C. Enter new mailing address, if applicable:		,E.1
(Mailing address MAY BE A POST OFFICE BOX		
		- 1 - 1212
		5
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		
	Thee address.	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:	(7 107 144 3) (4 4 144 144 144 144 144 144 144 144 14	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent.	stered Agent: I am familiar with and accept the obligations of the position.	
	Signature of New Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a) address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT John Doe V Mike Jones SV Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
Change Add Remove	<u>VC</u>	WILLIAM T. SILVA	4681 COUNTY RDAD 1 ST. PETERSBURG FL 33	
2) Change Add	VC	KENNETH A. GORDON, JR.	ST. PETERSBURG FL 33	
Remove 3) Change Add Remove			AN SI TEND	
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove				

(Be specific)					
_		·			
					_ · · · · · ·
	.				
					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
		·····			
				<u>≯</u> ≤	19
				>35	AUG
				32 J	<u>ੂ</u>
				<i>(3),7€</i> (3),7€	7
				1,33	*
			•	<u> </u>	- (8)
				<u> </u>	ZT:
. .				(200 (200)	
				· · · · · · ·	
	(Be specific)	(Be specific)			ALIAHJSSECTORIDA

The	ne date of each amendment(s) adoption: 07-0/-/9	f other than th
Effe	ffective date if applicable: 07-01-19	
	(no more than 90 days after amenament fac date)	
	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be locument's effective date on the Department of State's records.	isted as the
Ado	doption of Amendment(s) (CHECK ONE)	
Ø	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated <u>07-18-19</u>	
	Signature Management of the Signature Signatur	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	TOHN. W. SOULE (Typed or printed name of person signing)	
	REGISTERED AGENT PRESIDENT	<u> </u>